York County Parks Membership Form						
Name:			_			
Address:						
City:	State:		Zip:	_ Zip:		
Phone Number:		Date:				
E-Mail Address:						
I would like to receive my r	iewsletter via e	mail:	Yes	□ No		
Membership Fees (Yearly)	:	Make	checks n	ayable to YCPFC	Т	
☐ Student	\$10.00		(York County Parks Foundation Charitable Trust)			
☐ Seniors (age 59+)	\$10.00	Ma	Mail Form with payment to:			
☐ Individual	\$25.00	York County Parks				
☐ Family	\$30.00		400 Mundis Race Road York, PA 17406-9721			
☐ Contributor	\$75.00					
☐ Patron	\$100.00					
☐ Corporate	\$250.00					
☐ I'd like to make an addit	ional deductibl	e contribution	of \$	to:		
☐ York County Parl	ks Foundation (Charitable Trus	st			
☐ Friends of Cross ?	Mill					
☐ Friends of Heritag	ge Rail Trail Co	orridor				
☐ Friends of Canine	e Meadows					
☐ I am interested in volunte	eering					